

Q.C.  
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| POSITION                  | INITIALS | ID NO.  | DATE     |
|---------------------------|----------|---------|----------|
| FEE DETERMINATION         | D.T.     |         | 12-9-88  |
| O.I.P.E. CLASSIFIER       |          |         | 12-18-88 |
| FORMALITY REVIEW          |          |         |          |
| RESPONSE FORMALITY REVIEW |          | 6-16-94 | 1-24     |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim          | Date   |
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| Final Original |        |
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If more than 150 claims or 10 actions  
staple additional sheet here

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